| Effective December 8, 2004 | | | | | | | | | | 0/3 | 34264 | 5 |
|--|--|--|---|--|------------------|---------------------------------------|---------|------------------|------------------------|-----|----------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL EN TYPE | TITY | OR | OTHER SMALL | |
| U.S. NATIONAL STAGE FEES | | | | | | |] | RATE | FEE | 1 | RATE | FEE |
| BASIC FEE | | | SMALL ENT. = \$ 150 | | W | GE ENT. = \$ 300 | 1 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | Satisties PCT Article 33(1)- (4) = 8 50 / 8 100 | | | Other situations = \$ 100 / \$ 200 | 7 | EXAM. FEE | | 1 | EXAM FEE | 200 |
| SEARCH FEE | | | U.S. is ISA = \$50/\$ 100 ALL other countries = \$ 200/\$ 400 | | | thel'\$15,150cms = \$ 250 / \$ 500 | | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | / 50 = | | | X \$ 125 = | * | ľ | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 14 minus 20 = | | • | | ŀ | X \$ 25 = | | OR | X\$50= | |
| INDEPENDENT CLAIMS | | | 4 minus 3 = | | • | | | X\$100= | | OR | X \$ 200 = | 200 |
| MU | MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | +\$ 180 = | | OR | +\$360= | |
| • (| f the difference | | TOTAL | <u> </u> | OR | TOTAL | 1100.00 | | | | | |
| | 7-19-05 | · . | SMALL E | NTITY | OR | OTHER SMALL E | | | | | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMERIOMENT | | HIGHE HUME PREVIO PAID I | ER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • 14 | Minus | ີ 2 | 0 | = - | | X \$ 25 = | | OR | X\$50 = | |
| | Independent | • 4 | Minus | ••• | 4 | <u> </u> | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | Į | +\$ 180 = | · | OR | + \$ 360 = | 7 |
| TOTAL ADDIT. FEE OR YOTAL ADDIT. FEE OR YOTAL ADDIT. FEE | | | | | | | | | | | | |
| ABOMENT 8 | | (Column 1) CLAMS REMARKING AFTER AMENDMENT | · | (Column Highle MUMB PREVIOL PAID F | ST ER JSLY | (Column 3) PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADOI- TIONAL FEE |
| | Total | . 13 | Minus | ~ 20 |) | • — | | X\$25= | | OR | X\$50= | 7 |
| 9 | Independent | · 2 | Minus | ••• <u>1</u> | H | • · | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRES | ENTATION OF MI | ATIPLE DEPE | NDENT C | LAIM | | | +\$ 180 = | | OR | +\$ 380/= | |
| * If the entity in column 1 is less than the entry in column 2, write "V" in column 3. ** If the "Highest Number Previously Paid For" In THIS SPACE is less than "20", enter "20". ** If the "Highest Number Previously Paid For" In THIS SPACE is less than "3", enter "3". | | | | | | | | | | | | |
| | | moor Previously Paid I iber Previously Paid I | | | | | in the | eppropriate box | in column 1. | | | |

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